Health Systems Functionality in Ahafo Region

Rationale

The pursuit of improved health outcomes necessitates a strategic shift towards district-level focus, serving as a guiding force for targeted actions aimed at achieving tangible health results. The Ahafo Region adopted the WHO District Health System Functionality Assessment to measure the overall health system functioning among five (5) districts in the Ahafo Region. The assessment was conducted in public health facilities in the trained districts.

The assessment was conducted within the framework of Universal Health Coverage, Health Security, Determinants of Health, Primary Health Care, Service Provision Capacity, and Management Capacity in the Ahafo Region.

The current selective Primary Health Care (PHC) approach, which centers on specific conditions, fails to fully address the dynamic health needs of the population, making it imperative for the health system to adapt and respond accordingly. To achieve holistic and inclusive health outcomes, there is a need for a strategic re-evaluation of strategies and resource allocation, with comprehensive PHC prioritized, and districts playing a pivotal role in orchestrating success on multiple interconnected fronts.

Key messages

- The PHC approach is the most effective way to ensure the functionality of health systems. The regional overall average PHC score for the six elements (human resources, community empowerment, capacity for knowledge production, alignment of stakeholders to National priorities, financing and technology transfer) is 73.1%.
- Knowledge Capacity for Local Production and use is 58%. Investing in data-informed decisions through health research will improve the delivery of health interventions in the Ahafo Region.
- The Universal Health Coverage score in the Ahafo Region is 79.5%. Communities must be empowered to make decisions for their health and improve the effectiveness of the NHIS.
- Asunafo South District had the highest (97%) score for coverage of essential services. The district has the highest number of CHPS compounds (22), likely due to the high score.
- Service provision capacity score is 71%; increasing the number of model health centres and strengthening the practice network will improve access to essential services, which is low in the region.
- Management capacity score is 81%; this may be associated with the well-coordinated Health Management Teams and facilities with defined populations, boundaries, and set indicator targets for health services.
1. Ahafo Regional Overview: Health Service Outcomes

The Ahafo Region has a Universal Health Coverage score of 69%, 70% for Primary Health Care, 78% for Health Security, and 78% for Determinants of Health.

1.1 Universal Health Coverage

The overall average availability of essential services score is 76 out of 100. The availability of essential services for pregnancy and newborns is 88%; 94% for childhood, 72% for adolescents, 80% for adults, and 61% for elderly.

![UHC Coverage (%) by Districts Assessed in Ahafo](image)

Despite the high uptake of NHIS subscription (78.1%) in the region as indicated by the Ghana Statistical Service, there is still low score (55%) in financial risk protection. The scores ranged from 47% to 59% with an average score of 55%.

Figure 1: Ahafo region UHC scores within five (5) districts (source: WHO)

1.2 Health Security

The overall regional average health security score is 78%. The factors accounting for this are Prevention (76%), Detection (81%), Response (77%), and Organization and leadership (79%).

![Health Security Scores](image)

Among all the sub-sections, the region scored above 75%. This may be attributable to the existence of response teams in all districts.

Figure 2: Ahafo Region Health Security scores within five (5) districts (source: WHO)
1.3 Determinants of Health

The score for determinants of health is disaggregated by the four key components. The overall average determinants of health score is 78%. The social determinants of health stands at 84%, environmental determinants at 77%, economic determinants at 77% and political determinants at 72%.

The region performed above 75% in all the sub-sections except political and security determinants where it scored 72%.

This may be due to lack of commitment of resources by the political leadership.

1.4 Primary Health Care

The overall Ahafo regional average PHC score is 70 out of 100. This is computed from the six PHC elements based on the Alma Ata Declaration. The PHC approach for human resources is 68%, with community empowerment at 81%, capacity for knowledge production and use 58%, alignment of stakeholders with national priorities 93%, financing 66% and technology transfer standing at 55%.

The score of the region was optimal in two of the PHC elements (Alignment of Stakeholders to National Priorities - 93% and Empower Individuals & Communities - 81%).

The region however performed sub-optimally (<75%) especially on Technology (unstable electricity, poor internet connectivity, unavailable individual EHRS) and Knowledge Capacity for Local Production and Use.
## 2. Ahafo Regional Overview: System Functionality

The overall average health systems functionality score is 83%. The oversight capacity is 90%, management capacity 81% and health systems capacity has a score of 81%.

### 2.1 Service Provision Capacity

The overall service provision capacity score was 81%, with scores on the various elements: better access to essential services - 71%, effective demand for essential services 91%, higher quality of care 85% and robust resilience to shock events standing at 83%.

The regional overall score of 81% met the target of 75% though one element (better access to essential services) did reach the score of 75%.

### 2.2 Management Capacity

The overall score for management capacity of districts is 81%. Scores for the subcomponents are 80% and 95% for structure and systems respectively.

Asunafo South recorded the highest score for management capacity structure (92%), and Asutifi North had the lowest score - 62%.

Asunafo South has many CHPS Compounds where outreaches, home visits, and community durbars are conducted.

More CHPS and sufficient staff might improve management capacity in the region.

Figure 5: Ahafo region Service Provision Capacity scores within five (5) districts (source: WHO)

Figure 6: Graph of Ahafo region Management Capacity scores within five (5) districts (source: WHO)
2.3 Oversight Capacity

The overall oversight capacity score for the region is 90%. The subcomponent scores are Authority 88%, social accountability 84%, public health confidence 80%, stakeholders’ engagement 88%, legal and authority score is 96%, and regulatory mechanism is 96%.

Figure 7: Ahafo region Oversight Capacity scores within five (5) districts (source: WHO)

3. Regional Priorities Moving Forward

- The region is working on getting resources to train Asunafo North District to participate in the District Health System Functionality Assessment.
- The region will share scores of the District Health System Functionality Assessment with its stakeholders during review meetings to solicit resources to improve the health system functionality in the region.
- The region will also use the findings to write proposals to seek funding to improve health care delivery in the Ahafo region.
- Findings from the District Health System Functionality Assessment will also be used to build staff capacity through training to provide client-centered services that will improve social confidence in the health system in the Ahafo Region.
- Guided by the results of the DHSFA, the number of model health centres in the region will be increased to improve the coverage of essential health services.
- The Ahafo Region will leverage the networks of practice and the District Family Health System (DFHS) to improve health service outcomes.
References

• aho.afro.who.int

Sources

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Photography: https://photos.hq.who.int/, https://photos.afro.who.int/

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